

## Reviews and Bibliographical Notices.

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**Psychiatrie: Klinik der Erkrankung des Vorderhirns.**  
Von Dr. THEODORE MEYNERT, K. K. Ord. Ö., Professor der Nerven-krankheiten und Vorstrand der Psychiatrischen Klinik in Wien. Wien, Wilhelm Braumüller 1884. Erste Hälfte.

**Psychiatry: Clinic of the Affections of the Prosencephalon.** By Dr. THEODORE MEYNERT, Royal Imperial Professor in Ordinary of Nervous Disease, and head of the Psychiatric Clinic in Vienna. Vienna, William Braumüller, 1884. First Half.

### *First Notice.*

The present volume is by an acknowledged master of cerebral anatomy, and is an exposé of his doctrine that the pathology of insanity is a chapter in the anatomy of the prosencephalon. The subjects in the present segment of the work are: First: The form and relationships of the brain. Second: Anatomical corollaries and physiology of the brain. Third: The mechanism of the brain. Fourth: The mechanism of expression. Fifth: Review of prosencephalic diseases. Sixth: Clinical observations on prosencephalic diseases. It is needless to say that cerebro-anatomical subjects are most thoroughly discussed. Under physiology of the brain are discussed the relations of the mind to the brain. According to Meynert intelligence is not localized, the cortex as a whole being its seat. This section is a splendid presentation of the relations of the facts of consciousness to cerebral anatomy as understood at the present day. The chemistry of the brain is discussed at length. From a clinico-pathological standpoint Meynert divides the prosencephalic diseases into:

#### A. THOSE BASED ON ANATOMICAL CHANGES.

I.—Malformations of the skull and brain, well-checked intra-uterine, natal, or early childhood developmental processes.

*Clinical Results:* Imbecility, cretinism, deafmutism.

II.—From gross anatomical cerebral changes like hemorrhage, softening, tumors, sclerosis, syphilis.

*Clinical Results:* Delirium, paralysis, partial dementia, traumatic confusional insanity, symptomatic chorea, etc.

III.—Diffuse meningo-encephalic anatomical changes like cerebral hypertrophy, cerebral atrophy, hydrocephalus, meningitis, etc.

*Clinical Results:* Dementia, paretic dementia, senile dementia, delirium, basilar meningitis, acute mortal changes with chorea, epilepsy, hysteria, senile involution.

#### B. NUTRITIVE AFFECTIONS.

I.—Cortical irritable conditions.

*a.* Irritable emotional exaltation; pure raving mania.

*b.* Primary melancholia; depressed emotional conditions with inhibition of the will; ideas of self-littleness and self-accusations.

*c.* Primary mania, emotional exaltation, flights of ideas, and ideas of increased self-importance; chorea.

II.—Localized irritable weakness.

*a. Irritative states of the sub-cortical special-sense centres.*

General insanity.

Primary hallucinatory, confusional insanity.

Secondary, "with stuporose" and maniacal phases.

*b. Irritative states of the sub-cortical centres of general sensation.*

Hysteria, hypochondria.

Partial insanity.

*Manie-raisonnante.*

Persecutional insanity.

Megalomania.

*c. Affections of the sub-cortical vaso-motor centres.*

1. Hyperæsthesia.

Epilepsy.

Hystero-epilepsy.

2. Exhausting states of excitability.

Circular insanity.

Paralysis, ascending paralysis, morbus Basedowii.

#### C. TOXIC STATES.

It will be observed that these divisions are largely hypothetical.

The arguments in favor of them are logical and well worked out, but it must be confessed as a clinical classification this is too

cumbrous and confusing. Meynert differs, as most alienists will, from the dilettanteic psychiatrists who claim that delusions must originate in hallucinations or illusions. The work when completed will form a decidedly valuable contribution to the literature of psychiatry and will then be reviewed at length.

**Psychological Medicine.** By Dr. E. C. MANN. Philadelphia: P. Blakiston, Son, & Co., 1883.

The present rather portly volume is devoted not only to the subject of insanity, but also to "allied nervous diseases." The author is known to the readers of the *JOURNAL* through articles on the subject of insanity, and some of these are incorporated in the present work. The first part of the book is devoted to "Insanity in General: Its History and Classification," "Etiology of Insanity and Importance of its Repression in the Incipient Stages," "Prevention of Insanity," "Diagnosis and Prognosis of Insanity," "Civil Incapacity," "Legal Tests of Responsibility," "Hints for Giving Testimony," "Expert Testimony and the Functions of Experts in Insanity," "General Paralysis of the Insane," "Idiocy, Dementia, Folie Raisonnable," "Mental Responsibility and the Diagnosis of Insanity in Criminal Cases," "Histology and Functions of the Brain," "Pathology and Morbid Histology of Acute and Chronic Insanity," "Cases Illustrating Pathology and Morbid Histology of Insanity," "Treatment of Insanity," "Insanity in the Middle States," "Provision for the Chronic Insane," "Lunacy in England and Scotland," "The Necessity for a New Method of Introducing Expert Testimony in Criminal Trials where Insanity is Alleged as a Defence," "Codification of the Common Law as to Insanity." It will be obvious from these headings that the author's ideas of what is necessary in the arrangement of a work on insanity are in a decidedly confused state.

Dr. Mann in the first chapter cites a few classifications, but recommends none, and gives the impression to the student that the subject is of no importance. He seems to lean to the etiological classification of Skae. The remarks on etiology in the second chapter are based on the absurd "supposed causes," tables of asylum reports, and are therefore worthless. The remarks on the treatment of the incipient stages of insanity ignore facts which are now well recognized. The remarks on the prevention of insanity in the third chapter are less dilettanteish than those usually found under this head. Dr. Mann takes a very sound view of the evil influence of schools, but the chapter as a whole,